## Indiana State Police Clandestine Laboratory Occurrence Report This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date:	03/18/2014	Address:	1100 South Park Road
Incident #:	14ISPC002217		Lot 9
County:	FULTON		Rochester, IN 46975
Type of Laboratory Seizure (check one) Seizure Location (check all that apply)			
<ul><li>☑ Operational Lab</li><li>☐ Chemical/Glassware/Equipment (only)</li><li>☐ Dumpsite (only)</li></ul>		☐ Residence ☐ Outbuilding ☑ Vehicle	☐ Hotel/Motel ☐ Open – No Structure ☐ Other:
<ul> <li>Items Found: Location (bedroom, kitchen, open air, etc)</li> <li>(check all that apply)</li> <li>✓ One Pot or Birch Reaction(s): Rear passenger floorboard</li> </ul>			
Red Phosphorous/Iodine Reaction(s):			
Hydrochloric Acid Gas Generator(s):			
Flammable Solvents: Front passenger floorboard			
Water Reactive Metal (Lithium):			
Anhydrous Ammonia:			
Corrosive Acid: Front passenger floorboard			
Corrosive Base:			
Other (item and location):			
Vehicle Information:			
Owner: VIN: Year:	Matthew Milton 2G4WB52K2X1531503 1999	Make: Model:	BUICK RIVIERA
Child under age 18 discovered (check appropriate)  Yes (number present)  No Children not present but evidence they reside or visit often		Living conditions of home: clean disarray unclean Estimated length of time manufacturing had been occurring: 2 hours Additional Information:	
This report l	has been faxed* or emailed to the fo	llowing agencies th	at serve the location:
Fire Department City, Township or County Rochester FD Fax: fire@rochester.in.us  Health Department County: Fulton County Health Departmen Fax: fulton@isdh.in.gov  Department of Child Services Hotline: dcshotlinereports@dcs.in.gov  Fax: fire@rochester.in.us  Fax: fire@rochester.in.us  Fax: fire@rochester.in.us  Fax: fulton@isdh.in.gov  Department of Child Services Hotline: dcshotlinereports@dcs.in.gov  Fax: 317-234-7595 or 317-234-7596			
For further information regarding this methamphetamine laboratory, contact Investigating Officer: <u>Trp. Ben Reason</u> Phone (765) 473-6666			

\*This form is to be faxed to the Fire Department, Health Department and/or Department of Child Services listed within 24 hours of scene processing.